

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

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| <p style="text-align: center;">PLAINTIFF(S)</p> <p style="text-align: center;">v.</p> <p style="text-align: center;">DEFENDANT(S).</p> | <p style="text-align: center;">CASE NUMBER</p> <p style="text-align: center;">NOTICE OF CHANGE OF ATTORNEY INFORMATION</p> |
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The following information must be provided:

I, _____, _____, _____
Name *CA Bar ID Number* *E-mail Address*
 am counsel of record or out-of-state attorney in the above-entitled cause of action for the following party(s)

and am requesting the following change(s):

THIS SECTION MUST BE COMPLETED IF YOUR E-MAIL ADDRESS IS TO BE ADDED.

consent do not consent to receive service of documents by electronic means in accordance with Fed. R. Civ. P. 5(b)(2)(E) and 77 (d), and Fed. R. Crim. P. 49(b)-(d).

SELECT THE CATEGORY AND COMPLETE THE INFORMATION REQUESTED:

TO UPDATE NAME OR FIRM INFORMATION:

I am providing the following new information pursuant to Local Rule 83-2.7 to be updated on the above-entitled cause of action.

PROVIDE ONLY THE INFORMATION THAT HAS CHANGED

Attorney Name changed to _____

New Firm/Government Agency Name _____

New Address _____

New Telephone Number _____ New Facsimile Number _____

New E-mail address _____

TO BE ADDED AS COUNSEL OF RECORD: CHECK ONE BOX

I am counsel of record in the above-entitled action and should have been added to the docket in this case. I made my first appearance in this case on _____

This constitutes my Notice of Appearance to appear as counsel of record for the party(s) listed above in the above-entitled action.

IF YOUR FIRM IS NOT ALREADY PART OF THIS ACTION AND ARE ASSOCIATING IN AS COUNSEL OF RECORD A NOTICE OF ASSOCIATION SHOULD BE FILED. IF YOU ARE GOING TO APPEAR PRO HAC VICE, A SEPARATE APPLICATION OF NON-RESIDENT ATTORNEY TO APPEAR IN A SPECIFIC CASE, G-64 MUST BE FILED.

Attorney Name _____ CA State Bar Number _____
 Firm/Government Agency Name _____
 Address: _____
 Telephone Number _____ Facsimile Number _____
 New E-mail address _____

TO BE REMOVED FROM THE CASE: **

I am the aforementioned attorney from my firm is no longer counsel of record in the above-entitled cause of action.

CHECK ONE BOX

The order relieving me/the aforementioned attorney from my firm was filed on: _____.

There is/are other attorney(s) from the undersigned attorney's law firm/government agency who are counsel of record in this case.

I am the aforementioned attorney is no longer with the firm/government agency representing the above-named party in this action. There is/are attorney(s) from my former firm/government agency who are currently counsel of record in this case.

****This form *cannot* be used as a substitution of attorney form. For substitution of attorney procedures please refer to Local Rule 83-2.9 and form G-01, *Request for Substitution of Attorney* and G-01 ORDER, *Order on Request for Substitution of Attorney*. At least one member of the firm/government agency **MUST** continue to represent and receive service for the parties indicated above in this action.**

Date: _____

Signature of Attorney of Record / Attorney for the Firm

PLEASE NOTE: CM/ECF users must update their account information in the system pursuant to the General Order authorizing electronic filing, in addition to filing this Notice of Change of Attorney Information. A separate Notice must be filed in every pending case pursuant to Local Rule 83-2.7.